



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20543

BQ-3

November 24, 1993

Timothy I. McFeeley, Treasurer
Human Rights Campaign Fund Political
Action Committee
1012 14th Street, NW, #607
Washington, DC 20005

Identification Number: C00235853

Reference: February Monthly (1/1/93-1/31/93), March Monthly
(2/1/93-2/28/93), April Monthly (3/1/93-3/31/93), May
Monthly (4/1/93-4/30/93), June Monthly (5/1/93-
5/31/93), July Monthly (6/1/93-6/30/93), August
Monthly (7/1/93-7/31/93) and September Monthly
(8/1/93-8/31/93) Reports

Dear Mr. McFeeley:

This letter is to inform you that as of November 24, 1993, the Commission has not received your response to our requests for additional information, dated November 3, 1993. Those notices requested information essential to full public disclosure of your federal election financial activity and to ensure compliance with provisions of the Federal Election Campaign Act (the Act). Copies of our original requests are enclosed.

If no response is received within fifteen (15) days from the date of this notice, the Commission may choose to initiate audit or legal enforcement action.

If you should have any questions related to this matter, please contact Debbie Manzano on our toll-free number (800) 424-9530 or our local number (202) 219-3580.

Sincerely,

John D. Gibson
Assistant Staff Director
Reports Analysis Division

Enclosures



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

30-2

NOV 3 1993

Timothy I. McFeeley, Treasurer
Human Rights Campaign Fund Political
Action Committee
1012 14th Street, NW, #607
Washington, DC 20005

Identification Number: C00235853

Reference: May Monthly Report (4/1/93-4/30/93)

Dear Mr. McFeeley:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-The identification of each contributor, including the person's occupation and name of employer, must be provided if the person has contributed in excess of \$200 in the aggregate during the calendar year. Please amend Schedule A supporting Line 11(a)(i) for each entry lacking a contributor's occupation and name of employer.

Note: If your committee has made at least one effort per solicitation, either by a written request or by an oral request documented in writing to obtain this information from the contributor, your committee may have exercised "best efforts." Under 11 CFR 104.7(b), such effort shall consist of a clear request for the information (i.e., name, mailing address, occupation, and name of employer) which request informs the contributor that the reporting of such information is required by law. If you believe that your committee satisfies the "best efforts" provision, you should provide a copy of your solicitation or an explanation of the method(s) used to obtain contribution information. Clarification regarding "best efforts" should be disclosed during each two year election cycle beginning with the first report filed in the non-election year. 11 CFR §104.3(a)(4)(i)

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. The Act precludes a multicandidate committee from making a contribution to a national political party in excess of

HUMAN RIGHTS CAMPAIGN FUND POLITICAL
ACTION COMMITTEE
PAGE 2

\$15,000 in a calendar year. (2 U.S.C. §441a(a)) If you have made an excessive contribution, the Commission recommends that you notify the recipient and request a refund of the amount in excess of \$15,000. Any refund should appear on a supporting Schedule A for Line 16 of your next report.

If the contribution(s) in question was incorrectly reported and/or you have additional information, you may wish to submit documentation for the public record.

Although the Commission may take further legal steps concerning the excessive contribution(s), prompt action by you to obtain a refund will be taken into consideration.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,

Debbie Manzano

Debbie Manzano
Reports Analyst
Reports Analysis Division

SCHEDULE

FINANCIAL DISBURSEMENTS

Contributions to Federal Candidates

The number of pages of this report is 1

Page 1 of 1

Any information reported from each Federal and Candidate to this report is for the purpose of reporting to the public and is not to be used for any other purpose. The information should be reported in the name and address of the donor and not the name of the candidate.

NAME OF COMMITTEE OR FUND

Human Rights Campaign Fund Political Action Committee #C00235453

A. Full Name, Mailing Address and ZIP Code

BERNARD CHAMBERLAIN (CHAMBERLAIN)
450 S. CAPITOL ST.
WASHINGTON, DC 20003

Purpose of Disbursement

CONTRIBUTION

Disbursement for ☐ Primary ☐ General
☒ Other (specify) *FOR TO PAC*Date Disbursed
(M, Y, YR)

2-17-93

Amount of Cash
Disbursement This Period

\$ 15,000.00

B. Full Name, Mailing Address and ZIP Code

DAN FOST
2144 WASHINGTON ST.
DENVER, CO 80203Purpose of Disbursement *FOR PAC*
*SEE ABOVE, ADVERTISEMENTS, (ACCORD)*Disbursement for ☐ Primary ☐ General
☐ Other (specify)Date Disbursed
(M, Y, YR)

2-17-93

Amount of Cash
Disbursement This Period

475.00

C. Full Name, Mailing Address and ZIP Code

CHAPPELL FOR SENATE
PO BOX 791
PUEBLO, CO 81002Purpose of Disbursement *FOR PAC*
*ADVERTISEMENTS, CO-SEN*Disbursement for ☐ Primary ☒ General
☐ Other (specify)Date Disbursed
(M, Y, YR)

2-17-93

Amount of Cash
Disbursement This Period150.34
(ACCORD)

D. Full Name, Mailing Address and ZIP Code

SCHROEDER FOR CONGRESS
3000 LAVIARD
DENVER, CO 80205Purpose of Disbursement *FOR PAC*
*ADVERTISEMENTS, MD/CD-01*Disbursement for ☐ Primary ☒ General
☐ Other (specify)Date Disbursed
(M, Y, YR)

2-17-93

Amount of Cash
Disbursement This Period150.33
(ACCORD)

E. Full Name, Mailing Address and ZIP Code

SEARNS FOR CONGRESS
PO BOX 652
WESTMINSTER, CO 80030Purpose of Disbursement *FOR PAC*
*ADVERTISEMENTS, MD/CD-02*Disbursement for ☐ Primary ☒ General
☐ Other (specify)Date Disbursed
(M, Y, YR)

2-17-93

Amount of Cash
Disbursement This Period150.33
(ACCORD)

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for ☐ Primary ☐ General
☐ Other (specify)Date Disbursed
(M, Y, YR)Amount of Cash
Disbursement This Period

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for ☐ Primary ☐ General
☐ Other (specify)Date Disbursed
(M, Y, YR)Amount of Cash
Disbursement This Period

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for ☐ Primary ☐ General
☐ Other (specify)Date Disbursed
(M, Y, YR)Amount of Cash
Disbursement This Period

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for ☐ Primary ☐ General
☐ Other (specify)Date Disbursed
(M, Y, YR)Amount of Cash
Disbursement This Period

SUBTOTAL of Disbursements This Page (Amount)

\$ 15,475.00

TOTAL This Period (See top of the report)

\$ 15,475.00

2003
 10-10-03
 10-10-03

10-10-03
 10-10-03

Any information regarding this report should be provided to the Secretary of the Committee on the grounds of public access to the records of the Committee.

Name: **Human Rights Campaign Fund Political Action Committee** ID: **000235053**

A. Full Name, Mailing Address and ZIP Code DECC Special Election Fund 430 S. Capitol St. Washington, DC 20003	Purpose of Disbursement NO 048-2 contribution Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) special election	Date Disbursed (Mo., year) 04/01/93	Amount of Cash Disbursement This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code DECC Special Election Fund 430 S. Capitol St. Washington, DC 20003	Purpose of Disbursement NO 048-21 contribution Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) special election	Date Disbursed (Mo., year) 04/12/93	Amount of Cash Disbursement This Period 5,000.00
C. Full Name, Mailing Address and ZIP Code DECC Special Election Fund 430 S. Capitol St. Washington, DC 20003	Purpose of Disbursement NO CA-17 contribution Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) special election	Date Disbursed (Mo., year) 04/12/93	Amount of Cash Disbursement This Period 2,500.00
D. Full Name, Mailing Address and ZIP Code PLATE REPORTER for Congress 230 Court St. NE #11 Salem, OR 97301	Purpose of Disbursement Contribution DR 08-05 Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) debts	Date Disbursed (Mo., year) 04/12/93	Amount of Cash Disbursement This Period 2,500.00
E. Full Name, Mailing Address and ZIP Code Fund for Democracy 430 C St. NE Washington, DC 20002	Purpose of Disbursement Contribution Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) DR 10-05	Date Disbursed (Mo., year) 04/12/93	Amount of Cash Disbursement This Period 5,000.00
F. Full Name, Mailing Address and ZIP Code Sam Cooper Fund PO Box 897 Phoenix, AZ 85001	Purpose of Disbursement Contribution DR 02-01 Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) debts	Date Disbursed (Mo., year) 04/13/93	Amount of Cash Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code 	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date Disbursed (Mo., year)	Amount of Cash Disbursement This Period
H. Full Name, Mailing Address and ZIP Code 	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date Disbursed (Mo., year)	Amount of Cash Disbursement This Period
I. Full Name, Mailing Address and ZIP Code 	Purpose of Disbursement Disbursement for <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date Disbursed (Mo., year)	Amount of Cash Disbursement This Period

Subtotal of Disbursements This Page (Include all)	21,000.00
Total, This Period (Sum page one and two)	21,000.00